UNITED STATES DISTRICT COURT

for the

| | Eastern Distr | ict of No | rth Carolina | |
|--|--|---|---|---|
| J.O.C. FARMS, L.L.C., | |))) | | |
| Plaintiff(s) | |) | | |
| v. | |) | Civil Action N | lo. |
| RURAL COMMUNITY INSURA d/b/a RURAL COMMUNI SERVICES; FIREMAN'S FI COMPANY; (| TY INSURANCE UND INSURANCE |))) | | |
| Defendant(s |) |) | | |
| | SUMMONS I | IN A CIV | IL ACTION | |
| To: (Defendant's name and address) | William J. Murphy Administrator of Risk Ma U.S. Department of Agri Room 6092-S 1400 Independence Ave Washington, DC 20250 | iculture | nt Agency | |
| A lawsuit has been filed | l against you. | | | |
| are the United States or a Unite P. 12 (a)(2) or (3) — you must the Federal Rules of Civil Proce | d States agency, or an of serve on the plaintiff an a | ficer or enanswer to otion mus & Tadychite 100 | mployee of the the attached co t be served on t | ay you received it) — or 60 days if you United States described in Fed. R. Civ. omplaint or a motion under Rule 12 of he plaintiff or plaintiff's attorney, |
| If you fail to respond, ji You also must file your answer | | | d against you fo | or the relief demanded in the complaint. |
| | | | CLERK OF | F COURT |
| Date: | _ | | | Signature of Clerk or Deputy Clerk |

Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

| | This summons for (name | e of individual and title, if any) | | | | | | |
|---------|--|------------------------------------|---|-------|-------------|--|--|--|
| was rec | ceived by me on (date) | | _• | | | | | |
| | ☐ I personally served t | he summons on the indiv | idual at <i>(place)</i> | | | | | |
| | | | on (date) | ; or | | | | |
| | ☐ I left the summons a | t the individual's residen | ce or usual place of abode with (name) | | | | | |
| | , a person of suitable age and discretion who resides there, | | | | | | | |
| | on (date) | , and mailed a co | py to the individual's last known address; or | | | | | |
| | ☐ I served the summor | IS ON (name of individual) | | , who | o is | | | |
| | designated by law to a | ccept service of process o | n behalf of (name of organization) | | | | | |
| | | | on (date) | ; or | | | | |
| | ☐ I returned the summ | ons unexecuted because | | | or | | | |
| | Other (specify): | | | | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total of \$ | 0.00 | | | | |
| | I declare under penalty | of perjury that this inform | nation is true. | | | | | |
| Date: | | | Server's signature | | | | | |
| | | | berver 3 signature | | | | | |
| | | | Printed name and title | | | | | |
| | | | Server's address | | | | | |

Additional information regarding attempted service, etc: